

DHR DIVISION OF MHDDAD

QUALIFIED MEDICATION AIDE (QMA)

PROVIDER INFORMATION

Governor Sonny Perdue signed into law legislation that permits licensed Georgia nurses to delegate to **trained, certified staff**, known as Qualified Medication Aides (QMA's), the task of giving **medications** to **residents** in homes licensed as Community Living Arrangements. Under the new law, certified QMA's may work **only** in Community Living Arrangement homes in Georgia.

The **first QMA program begins in September 2006**. All classes will be taught at Atlanta Technical College. The program will last 2 quarters with anticipated graduation and certification of the first QMA class in Spring 2007.

This information is intended to assist you in supporting your staff that desire to be trained and certified as QMA's.

REGISTERED NURSE OVERSIGHT

If you decide to use QMA's in your home(s), you must have a **registered nurse** on staff or under contract. The registered nurse is responsible for:

- a. Delegation to the QMA the administration of medications and nursing tasks
- b. Ongoing supervision and oversight of the QMA
- c. Assessment of QMA performance/competence

There must be one registered nurse available and responsible for every 15 qualified medication aides in any one organization

PERMITTED QMA ACTIVITIES

The following tasks are within the scope of activities addressed in statute for the qualified medication aide (QMA) unless prohibited by individual community living arrangement policy. See § 43-26-56.

1. Observe and report to the licensed nurse any changes in the resident's condition.
2. Record in the MAR all medications that the QMA has personally administered, including a resident's refusal to take medication. The QMA shall not record in the MAR any medication that was administered by another person.
3. Administer physician-ordered oral, ophthalmic, topical, otic, nasal, vaginal, rectal medications and medications by gastric ('G' or 'J') tube.
4. Administer insulin under physician direction and protocol. Insulin may be administered if the following has been implemented:

- a. The physician or designee has personally documented a protocol for and trained the QMA on the proper administration of insulin according to the protocol;
 - b. The physician or designee has personally determined through direct observation and documented that the QMA is competent to give the insulin;
 - c. The protocol is on file within the record of the resident;
 - d. The competency determination is on file within the personnel records of the agency serving the resident.
5. Administer medication via metered dose inhaler.
 6. Document in the resident's clinical record the observations of the resident made by the QMA, including what the QMA sees, hears, smells, or otherwise observes.
 7. Document what is reported by the resident to the QMA.
 8. Conduct finger stick blood glucose testing (specific to the glucose meter used), following the established protocol for each individual resident.
 9. Provide standard maintenance care to a healed G-tube or J-tube site as ordered.
 10. Administer a commercially prepared disposable enema, as ordered by a physician.
 11. Administer treatment for skin conditions, including stage I and II decubitus ulcers, following a designated protocol.

The task force working on this project *is proposing* that the following additional permitted activities be included in rules adopted by the Board.

1. Measure and document vital signs prior to the administration of medication.
2. As ordered, administer medication only after personally preparing (setting up) the prescribed medication(s).
3. Crush or otherwise alter and administer medications if such preparation is appropriate per physician's order and as directed by the pharmacy.
4. Count, administer and record medication, including controlled substances according to federal and state guidelines.
5. Ensure through receipt of a facsimile or other transferred written communication that written physician orders related to new medications, changes in medications, and discontinued medications have been properly recorded in the Medication Administration Record (MAR). Ensure that the written physician order is placed on file within the resident record.
6. Ensure that discontinued medications are removed from the active supply, stored in locked containers and are disposed of per agency policy.
7. Document in a formal incident report if a medication is inadvertently altered, destroyed or lost.
8. Administer PRN medications ordered by a physician or a health care professional with legal prescriptive authority only if the order is written with specific parameters that preclude independent judgment.
9. Assist in the supervised self-administration of medication.
10. Receive direction regarding discrete medication issues from a physician or licensed medical practitioner as permitted by Georgia law and professional practice acts. Directions received from a physician or licensed medical

practitioner must be documented in writing, signed by the licensed practitioner and faxed for inclusion into the resident's record.

11. Under the direction of the licensed nurse, participate in the safe management of Schedule II medications including, but not limited to:
 - a. Signing for receipt of medications received from the pharmacy
 - b. Maintaining medications under a double-locked system of storage
 - c. Accurately recording the administration of medication on the resident's MAR
 - d. Maintaining a separate log or sign-out document accounting for Schedule II medications at least once every 24 hours
 - e. Disposing of discontinued or outdated medications in a manner that not easily retrievable, such as returning to the pharmacy for destruction
 - f. Serving as a witness to the disposal of discontinued or outdated medications
 - i. Documentation shall be signed by two witnesses, one of which may be a QMA

PROHIBITED QMA ACTIVITIES

The following tasks are those that are **not** considered to be within the scope of QMA activities. These tasks are intended to be prohibited in the rules to be promulgated by the Board after the law becomes effective on July 1, 2006.

1. The QMA may not administer the initial dose of a newly ordered medication.
2. The QMA may not administer medication intravenously.
3. The QMA may not administer medication by injection, except for insulin or epinephrine. Insulin or epinephrine may be administered if the following has been implemented:
 - a. The physician or designee has personally documented a protocol for and trained the QMA on the proper administration of insulin or epinephrine according to the protocol;
 - b. The physician or designee has personally determined through direct observation and documented that the QMA is competent to give the insulin or epinephrine;
 - c. The protocol is on file within the record of the resident;
 - a. The competency determination is on file within the personnel records of the agency serving the resident.
4. The QMA may not administer medication used for intermittent positive pressure breathing (IPPB) treatments or any form of medication inhalation treatments, other than metered dose inhaler.
5. The QMA may not administer medication per nasogastric tube.
6. The QMA may not administer treatment that involves advanced skin conditions, including stage III and IV decubitus ulcers
7. The QMA may not receive telephone or verbal orders for medication changes.
 - a. The QMA may receive direction from a physician or other licensed personnel authorized by the state to give orders related to medications

provided the direction is documented and received by a facsimile or other transferred written communication for inclusion in the resident record.

8. The QMA may not instill irrigation fluids of any type including, but not limited to:
 - a. Colostomy; and
 - b. Urinary Catheter
9. The QMA may not administer chemotherapy drugs, except for Tamoxifen.

STATE LEVEL OVERSIGHT

Under the new law, the Georgia Board of Examiners of Licensed Practical Nurses (“Board”) will oversee QMA training program(s), approve a NCLEX style competency exam, and certify QMA’s to work in Georgia.

TRAINING PROGRAM

Training for Qualified Medication Aides will occur **only** in schools under the Georgia Department of Technical Adult Education. Atlanta Technical College is the only program that will offer this new program for the next several years. The address for the school is:

Atlanta Technical College
1560 Metropolitan Parkway SW
Atlanta, Georgia 30310

Contact the college at 404-225-4400 or www.atlantatech.edu

PROGRAM SIZE

A maximum number of 25 students will be admitted to any one class.

MORE QUESTIONS?

Please **e-mail** your questions to mlrahn@dhr.state.ga.us or go to the Provider Information link at www.mhddad.state.ga.us. We will collect your questions and post answers on a FAQ site.